

Since the 1980's, there has been significant migration from Africa to the United States, and today, the African-born population in the US has increased to almost 1.5 million, accounting for a small but growing share of the nation's entire immigrant population. Many African immigrants settle in large metropolitan areas including the DC-VA-MD region. According to the American Community Survey, from 1990 - 2009, the African-born population in Virginia increased more than 5-fold to nearly 70,000, most of whom reside in Northern Virginia (McCabe, 2011).

While HIV/AIDS affect individuals of all races and origins, certain regions such as sub-Saharan Africa have disproportionally high prevalence rates. In addition, likelihood for HIV transmission may be enhanced by sexual abuse and violence, unsafe blood products, drug use, and social factors such as conflict, discrimination, gender bias, and sociopolitical marginalization. Thus, it is vital that immigrants and refugees from this region receive appropriate medical care, including STD and HIV testing and subsequent treatment and care (CDC, 2010). Immigrants are also more likely to be diagnosed with HIV-2, which is largely confined to persons in or from West Africa. From 1988-2010, there were 166 cases of HIV-2 in the United States reported to the CDC and out of those, 81% were among persons born in West Africa, and an additional 8% were born in other or unspecified parts of Africa (CDC, 2011).

HIV/AIDS PREVALENCE

Among the 22,257 Virginians living with HIV disease at the end of 2009, country of birth data was available for 55% (12,159) from the enhanced HIV/AIDS Reporting System (eHARS). Out of these, 682 persons (5.6%) were born in Africa*. While these individuals emigrated from 39 different African countries all over the continent, there was a much higher number of immigrants from Ethiopia (n=249), followed by those born in Ghana (n=66) and Sierra Leone (n=45).

HIV DISEASE DIAGNOSES

The number of foreign-born Blacks is difficult to ascertain given the lack of sufficient country-of-birth data. From 2005-2009, a total of 3,149 non-Hispanic Black adults and adolescents were diagnosed with HIV disease in Virginia. Within this group, 73% did not have information on country of birth. But among those with specified country of birth (n=853), 256 (30%) were African-born.

Previous nation-wide analyses have noted epidemiological differences in HIV transmission and disease progression between native-born and foreign-born Blacks, including those born in Africa and the Caribbean. These studies demonstrate a need to improve the capturing of country of birth information, which will better serve the growing immigrant population by producing culturally specific education and care-seeking information (Kerani 2008; Satcher Johnson 2010).

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*African-born is defined as having one of the 54 African countries recorded as the country of birth in eHARS (Sudan and South Sudan were not distinguished in code). This population may include permanent residents, temporary migrants such as students, refugees, and persons illegally present in the United States.